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indicated unless correct maintenance fee notifica	ted below or directed of	herwise in Block 1, by (		_			rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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SAN FRANCIS	CO, CA 94111-383		Andrea S, Beck			(Depositor's name)	
				Mudul	, [	<u> </u>	(Signature)
				3	13/07		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	₹	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/667,242	09/18/2003		Mark Flowers		020824-001110US		4645
TITLE OF INVENTION	I: SURFACE POSITION	LOCATION SYSTEM	AND METHOD				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOT	CAL FEE(S) DUE	DATE DUE
nonprovisional	. NO	\$1400	\$0	\$0		\$1400	03/19/2007
EXAM	TINER	ART UNIT	CLASS-SUBCLASS				
SHANKAR, VIJAY		2629	178-018010				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> <li>ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)				
	•			. ,	ee is identifie	ed below, the do	ocument has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
LeapFrog Enterprises, Inc. Emeryville, CA							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government							
4a. The following fee(s) are submitted:  Substitute    Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 10			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)  \[ \begin{align*} \text{ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \end{align*} \]  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requestreet of the United Sta	uired) will not be accepted	from anyone other than Office.	the applicant; a regi	stered attorne	y or agent; or the	e assignee or other party in
Authorized Signature		Date 3/13/07					
Typed or printed nam	e <u>Patrick R.</u>	Jewik	·	Registration N	10. <u>40,</u> 4	÷56	<u></u> .
rioxanaria, virginia 225	13-1430.		on is required to obtain or 1.14. This collection is es depending upon the indicate the Chief Information Office COMPLETED FORMS Topond to a collection of interpretation of the control o				by the USPTO to process) gathering, preparing, and the you require to complete triment of Commerce, P.O. or Patents, P.O. Box 1450, number.